

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <b>097180579</b>	FILING DATE <b>NOV 12 1998</b>
						APPLICANT(S)	
CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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<b>TOTAL IND.</b>							
<b>TOTAL DEP.</b>							
<b>TOTAL CLAIMS</b>							